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1 760 792 1217 P.02

Attorney Docket No. 18120

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am an original, first and sole inventor (if one inventor is listed below) or an original, first and joint inventor (if more than one inventor is listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled, "Method for Controlling a Hydraulic System of a Mobile Working Machine", the specification of which is attached hereto OR was filed August 1, 2005 and has since been granted U.S. Patent Application Serial Number 10/544,155 and amended on none.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37 C.F.R. 1.56(a), including for continuation-in-part applications, material information that became available between the filing date of the prior application and the national or PCT international filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate(s), or under 35 U.S.C. 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below, and have also identified below, by checking the box indicating that no priority is claimed, any foreign application for patent, inventor's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application No(s).	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Claimed? Yes	Priority Claimed? No	Certified Copy Attached? Yes	Certified Copy Attached? No
DE 103 07 190.3 PCT/DE2004/000180	Germany PCT	02/20/2003 02/04/2004	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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Name of first or sole inventor Monika IVANTSYNOVA

Residence Purdue University, 225 S. University Street, West Lafayette, IN 47907

Citizenship Germany

Post Office Address Purdue University, 225 S. University Street, West Lafayette, IN 47907

Inventor's signature [Signature]

Date 01/26/06

Attorney Docket No. 18120

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Name of first or sole inventor

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Inventor's signature

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Name of first or sole inventor

Jürgen WEBER

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Baumwiesenweg 21, D-01139 Dresden, Germany

Inventor's signature

Date

Attorney Docket No. 18120

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DB 103 07 1903 PCT/DE2004/000180	Germany PCT	02/20/2003 02/04/2004	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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Inventor's signature

Date

Attorney Docket No. 18120

Name of first or sole inventor	Robert RAHMFIELD
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Citizenship	Germany
Post Office Address	Rudolf-Kinau-Allee 12, 21129 Hamburg, Germany
Inventor's signature	<u>Robert Rafield</u>
	Date <u>24 January 2006</u>

Name of first or sole inventor	Jürgen WEBER
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Post Office Address	Baumwiesenweg 21, D-01139 Dresden, Germany
Inventor's signature	
	Date

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Attorney Docket No. 18120**DECLARATION AND POWER OF ATTORNEY**

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			<input checked="" type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input checked="" type="checkbox"/>

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POWER OF ATTORNEY: As a named inventor, I hereby appoint all attorneys and agents associated with the following customer number to prosecute this application and transact all business in the Patent and Trademark Office connected therewith and I direct correspondence to be sent to the address associated with that customer number:

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Inventor's signature

Date

8000 877 33 3333 3333

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Name of first or sole inventor	Robert RAHMFIELD
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Citizenship	Germany
Post Office Address	Rudolf-Kineu-Allee 12, 21129 Hamburg, Germany

Inventor's signature	Date
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Citizenship	Germany
Post Office Address	Baumwiesenweg 21, D-01139 Dresden, Germany

Inventor's signature	Date 2/23/06
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